PATEN	T APP	LICATION FEE DETERMINATION RE	CORD
• •	•	Effective October 1, 2000	
	<u>CI</u>	AIMS AS EILED - PART I	

Application or Docket Number

Effective October 1, 2000								\bot	297	75	513	9
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
TC	TAL CLAIMS		2	-			F	ATE .	FEE	7.10	RATE	FEE
FOR			NUMBER	R FILED NUMB		ER EXTRA	BASIC FEE		355.00	OR	BASIC FÉE	710.00
TOTAL CHARGEABLE CLAIMS		2 min	inus 20=			X\$ 9=		·	OR	X\$18=		
INDEPENDENT CLAIMS			9 mil	9 minus 3 = 0		• • •	X40=			OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2								OTAL	35	OR	TOTAL	
1	14 C	OTHER THAN SMALL ENTITY OR SMALL ENTITY										
ENDMENT A	:	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	DUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MQ.	Total	• 19	Minus	** . i	30 .	= /	х	\$ 9 =		OR	X\$18=	
AME	Independent	NTATION OF MI	Minus	***	3	= /	X	40=	1	OR	X80=`	
	FIRST PRESE	NIATION OF MI	LIPLE DEF	ENDEN	CDAIN		+1	35=	1	OR	+270=	
TOTAL OR TOTAL OR ADDIT. FEE												
		(Column 1)		(Colu		(Column 3)	•	II. FEE	/	•	ADDII. 1 EE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
2	Total	•	Minus	**		=	×	\$ 9=		OR	X\$18=	
AME	Independent	NTATION OF MU	Minus	ess ENDENT	CLAIM		X	40=	;	OR	X80=	
L	HAST PRESE	TOTALION OF THE		CHOLIN	OO tille		' +1	35=		OR	+270=	
		•					ADD	TOTAL		OR	TOTAL ADDIT. FEE	
		(Column 1)	•	(Colu	mn 2)	(Column 3)				•	ADDII. 1 CE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA		ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	X	\$ 9=	27.878.	OR	X\$18=	
ME	Independent	•	Minus	***		=	X	40=		OR	X80=	٠.
L	FIRST PRESE	NTATION OF M	JLTIPLE DEF	ENDEN	GLAIM		1	35=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, writ "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is I so than 20, enter "20." ADDIT FEE												
•••	** If th "Highest Number Previously Paid For" IN THIS SPACE is I so than 20, enter "20." ***If th "Highest Number Previously Paid For" IN THIS SPACE is I so than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											